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CONFIRMATION NO. 2921

Bib Data Sheet

|                             |                                       |              |                        |                                   |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER<br>09/971,856 | FILING DATE<br>10/05/2001<br><br>RULE | CLASS<br>356 | GROUP ART UNIT<br>2877 | ATTORNEY<br>DOCKET NO.<br>5-4-1-5 |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/240,447 10/13/2000

*ah*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*NONE*  
*ah*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/08/2001

|  |                                   |                         |                       |                            |
|--|-----------------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR<br>COUNTRY<br>GERMANY    | SHEETS<br>DRAWING<br>12 | TOTAL<br>CLAIMS<br>33 | INDEPENDENT<br>CLAIMS<br>4 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |                                   |                         |                       |                            |
| Verified and<br>Acknowledged   | Examiner's Signature<br><i>ah</i> | Initials<br><i>ah</i>   |                       |                            |

## ADDRESS

Docket Administrator (Room 3J-219)

Lucent Technologies Inc.

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07733-3030

## TITLE

System and method for optical scanning

|            |   |  |
|------------|---|--|
| FILING FEE | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
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